



Atty. Docket No. 036481-0121

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Charles POTTER et al.
Title: SYRINGE AND CAPSULE
THEREFOR
Appl. No.: 09/462,218
Appl. Filing Date: 05/22/2000
Examiner: Kevin C. Simons
Art Unit: 3763

REQUEST FOR CONTINUED EXAMINATION (RCE)
TRANSMITTAL

Mail Stop RCE
Commissioner for Patents
PO Box 1450
Alexandria, Virginia 22313-1450

Sir:

This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the above-identified application. This RCE and the enclosed items listed below are being filed prior to the earliest of: (1) payment of the issue fee (unless a petition under 37 C.F.R. § 1.313 is granted); (2) abandonment of the application; or (3) the filing of a notice of appeal to the U.S. Court of Appeals for the Federal Circuit under 35 U.S.C. §141, or the commencement of a civil action under 35 U.S.C. §145 or §146 (unless the appeal or civil action is terminated).

1. **Submission required** under 37 C.F.R. §1.114: (check items that apply)

a. Previously submitted:

- ☐ Please enter and consider the amendment/reply previously filed on ____.
- ☐ Please consider the Affidavit(s)/Declaration(s) previously filed on ____ but not considered.

RECEIVED

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TECHNOLOGY CENTER R3700

03/02/2004 DTESSEM1 00000111 09462218

01 FC:1301
02 FC:1255

770.00 OP
2010.00 OP

☐ Please consider the arguments in the Appeal Brief or Reply Brief under 37 C.F.R. § 1.116 previously filed on ____.

☐ Other ____.

b. Enclosed are:

☒ Amendment/Reply.

☐ Affidavit(s)/Declaration(s).

☐ Information Disclosure Statement.

☐ Form PTO-1449 with copies of ____ listed reference(s).

☐ Other .

Miscellaneous:

☐ Suspension of action of the above-identified application is requested under 37 C.F.R. § 1.103(c) for a period of ____ months.

The filing fee is calculated below:

	Claims as Amended	Previously Paid For	Extra Claims Present	Rate	Fee Totals
RCE Fee 1.17(e):				\$770.00	= \$770.00
Total Claims:	25	- 25	= 0	x \$18.00	= \$0.00
Independents	3	- 3	= 0	x \$86.00	= \$0.00
First presentation of any Multiple Dependent Claims:				+ \$290.00	= \$0.00
CLAIMS FEE TOTAL:					= \$770.00

☒ Applicant hereby petitions for an extension of time under 37 C.F.R. §1.136(a) for the total number of months checked below:

<input type="checkbox"/>	Extension for response filed within the first month:	\$110.00	0	\$0.00
<input type="checkbox"/>	Extension for response filed within the second month:	\$420.00		\$0.00
<input type="checkbox"/>	Extension for response filed within the third month:	\$950.00		\$0.00
<input type="checkbox"/>	Extension for response filed within the fourth month:	\$1,480.00		\$0.00
<input checked="" type="checkbox"/>	Extension for response filed within the fifth month:	\$2,010.00		\$2,010.00
	EXTENSION FEE SUBTOTAL:			\$2,010.00
	EXTENSION FEE ALREADY PAID:	-		\$0.00
	EXTENSION FEE TOTAL			\$2,010.00
	CLAIMS AND EXTENSION FEE TOTAL:			\$2,780.00
<input type="checkbox"/>	Small Entity Fees Apply (subtract ½ of above):			\$0.00
<input type="checkbox"/>	Suspension of action requested under 37 C.F.R. § 1.103(c)			\$0.00
	TOTAL FEE:			\$2,780.00

☐ Please charge Deposit Account No. 19-0741 in the amount of _____. A duplicate copy of this transmittal is enclosed.

☒ A check in the amount of \$2,780.00 to cover the filing fee is enclosed.

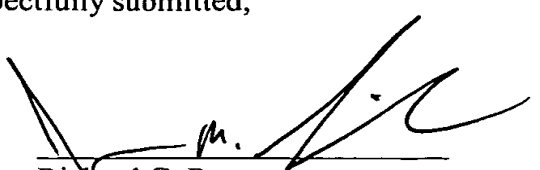
☒ The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Respectfully submitted,

Date 26 February 2004
Customer Number: 22428
FOLEY & LARDNER
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Suite 500
Washington, D.C. 20007-5143

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By


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40,413